| IPE                                                                                                                                                                                                                                                                                                                                                                    |                                                                                            | PART I                                                      | B - FEE(S) TRA                                                                                                                                                        | NSMITTAL                                                                                                                                                                                                                                                                                                                                                |                                                                                      |                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| \\$\ \&\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \                                                                                                                                                                                                                                                                                                                            |                                                                                            |                                                             |                                                                                                                                                                       | Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885                                                                                                                                                                                                                                                                   |                                                                                      |                                                                                    |
| INSTRUCTIONS: THIS for appropriate TAIDAD for con indicated unless-corrected maintenance fee notification                                                                                                                                                                                                                                                              | rm should be used for tran<br>respondence including the<br>below or directed otherwise     | smitting the ISSU<br>Patent, advance o<br>in Block 1, by (a | JE FEE and PUBLIC<br>rders and notification<br>a) specifying a new of                                                                                                 | CATION FEE (if requ<br>of maintenance fees v<br>correspondence address                                                                                                                                                                                                                                                                                  | ired). Blocks 1 through 5 will be mailed to the curren ; and/or (b) indicating a sep | should be completed where<br>t correspondence address a<br>parate "FEE ADDRESS" fo |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)                                                                                                                                                                                                                                                                                           |                                                                                            |                                                             |                                                                                                                                                                       | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.                                                           |                                                                                      |                                                                                    |
| 000116 7590 02/07/2006                                                                                                                                                                                                                                                                                                                                                 |                                                                                            |                                                             |                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                         | J                                                                                    |                                                                                    |
| PEARNE & GORDON LLP<br>1801 EAST 9TH STREET<br>SUITE 1200                                                                                                                                                                                                                                                                                                              |                                                                                            |                                                             |                                                                                                                                                                       | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |                                                                                      |                                                                                    |
| CLEVELAND, OH 44114-3108                                                                                                                                                                                                                                                                                                                                               |                                                                                            |                                                             |                                                                                                                                                                       | Susan K. Naughton (Depositor's name)                                                                                                                                                                                                                                                                                                                    |                                                                                      |                                                                                    |
| 05/10/2006 HVUDNG2 00000039 10036921                                                                                                                                                                                                                                                                                                                                   |                                                                                            |                                                             |                                                                                                                                                                       | Suran K                                                                                                                                                                                                                                                                                                                                                 | . Naughten                                                                           | (Signature)                                                                        |
| 01 FC:1504<br>02 FC:1501                                                                                                                                                                                                                                                                                                                                               | 300.00 OP<br>1400.00 OP                                                                    |                                                             |                                                                                                                                                                       | 5-4-06                                                                                                                                                                                                                                                                                                                                                  | d                                                                                    | (Date)                                                                             |
| APPLICATION NO.                                                                                                                                                                                                                                                                                                                                                        | FILING DATE                                                                                | FIRST NAMED INVI                                            |                                                                                                                                                                       | TOR                                                                                                                                                                                                                                                                                                                                                     | ATTORNEY DOCKET NO.                                                                  | CONFIRMATION NO.                                                                   |
| 10/036,921                                                                                                                                                                                                                                                                                                                                                             | 12/21/2001                                                                                 | James R. Matts                                              |                                                                                                                                                                       | n                                                                                                                                                                                                                                                                                                                                                       | 34276                                                                                | 5057                                                                               |
| APPLN. TYPE                                                                                                                                                                                                                                                                                                                                                            | SMALL ENTITY                                                                               | ISSUE F                                                     | EE PI                                                                                                                                                                 | UBLICATION FEE                                                                                                                                                                                                                                                                                                                                          | TOTAL FEE(S) DUE                                                                     | DATE DUE                                                                           |
| nonprovisional                                                                                                                                                                                                                                                                                                                                                         | NO                                                                                         | \$1400                                                      |                                                                                                                                                                       | \$300                                                                                                                                                                                                                                                                                                                                                   | \$1700                                                                               | 05/08/2006                                                                         |
| EXAMINER                                                                                                                                                                                                                                                                                                                                                               |                                                                                            | ART UNIT                                                    |                                                                                                                                                                       | LASS-SUBCLASS                                                                                                                                                                                                                                                                                                                                           | ]                                                                                    |                                                                                    |
| DYKE, KERRI M                                                                                                                                                                                                                                                                                                                                                          |                                                                                            | 2667                                                        |                                                                                                                                                                       | 370-241000                                                                                                                                                                                                                                                                                                                                              | J                                                                                    |                                                                                    |
| <ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol> |                                                                                            |                                                             | registered attorney or agent) and the names of up to                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                                                    |
| 3. ASSIGNEE NAME AND                                                                                                                                                                                                                                                                                                                                                   | RESIDENCE DATA TO B                                                                        | E PRINTED ON                                                | THE PATENT (print of                                                                                                                                                  | or type)                                                                                                                                                                                                                                                                                                                                                |                                                                                      |                                                                                    |
| PLEASE NOTE: Unless recordation as set forth in                                                                                                                                                                                                                                                                                                                        | an assignee is identified be 37 CFR 3.11. Completion                                       | elow, no assignee of this form is NO                        | data will appear on t<br>T a substitute for filin                                                                                                                     | the patent. If an assign<br>g an assignment.                                                                                                                                                                                                                                                                                                            | ee is identified below, the o                                                        | document has been filed for                                                        |
| recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assign  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and S                                                                                                                                                                                                            |                                                                                            |                                                             |                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                         | COUNTRY)                                                                             |                                                                                    |
| Nortel Networks Limited                                                                                                                                                                                                                                                                                                                                                |                                                                                            |                                                             | St. Laurent, Quebec, Canada                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                                                    |
| Please check the appropriate                                                                                                                                                                                                                                                                                                                                           | assignee category or catego                                                                | ries (will not be p                                         | rinted on the patent):                                                                                                                                                | ☐ Individual    Co                                                                                                                                                                                                                                                                                                                                      | orporation or other private gr                                                       | oup entity Government                                                              |
| 4a. The following fee(s) are enclosed:  XX Issue Fee  XX Publication Fee (No small entity discount permitted)                                                                                                                                                                                                                                                          |                                                                                            |                                                             | 4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.                                          |                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                                                    |
| Advance Order - # of Copies                                                                                                                                                                                                                                                                                                                                            |                                                                                            |                                                             | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $16-0820$ (enclose an extra copy of this form). |                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                        | (from status indicated above                                                               | •                                                           |                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                         | LL ENTITY status. See 37 C                                                           |                                                                                    |
| **                                                                                                                                                                                                                                                                                                                                                                     | is requested to apply the Issuublication Fee (if required) words of the United States Page |                                                             | • •                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                                                    |
| merest as shown by the feet                                                                                                                                                                                                                                                                                                                                            | // Onited Spaces Pate                                                                      | and Hademark                                                | . Office.                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                         | 1 1                                                                                  |                                                                                    |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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